

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 245865US0DIV
		First Inventor or Application Identifier Anne LAQUEYRERIE
		Title MYCOBACTERIAL PROTEINS, MICROORGANISMS PRODUCING THEM AND THEIR USE FOR VACCINES AND FOR THE DETECTION OF TUBERCULOSIS

U.S.PTO
10/7/2019
112503

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input checked="" type="checkbox"/> Application Data Sheet, 3 pages, See 37 CFR 1.76 9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small> 16. <input checked="" type="checkbox"/> Other: Request for Priority
2. <input checked="" type="checkbox"/> Specification Total Sheets 39		
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 15		
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 4 <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small> 		
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
6. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification or Sequence Listing on : <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> Paper c. <input checked="" type="checkbox"/> Statements verifying identity of above copies 		

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.: 09/985,372

Prior application information: Examiner: Graser Group Art Unit: 1645

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

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Docket No. 245865US0DIV
12503
INVENTOR(S) Anne LAQUEYRERIE, et al.
SERIAL NO: New Application
FILING DATE: Herewith

FOR: MYCOBACTERIAL PROTEINS, MICROORGANISMS PRODUCING THEM AND THEIR USE FOR VACCINES AND FOR THE DETECTION OF TUBERCULOSIS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	10 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
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			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$770.00
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
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Date: November 25, 2003



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